



02975.000013

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

HIRONORI TAKANO, ET AL.

Application No.: 10/022,504

Filed: December 20, 2001

For: BINOCULAR VIBRATION
CORRECTING DEVICE AND
BINOCULAR OPTICAL
INSTRUMENT

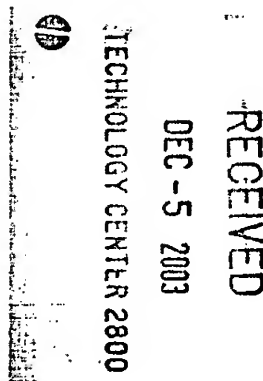
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Examiner: J.L. Pritchett
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Group Art Unit: 2842
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December 2, 2003

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

Further to the Amendment timely filed on November 3, 2003, please amend
the above-identified application as follows.



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 : Examiner: J. L. Pritchett
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 : Group Art Unit: 2842
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 For: BINOCULAR VIBRATION CORRECTING)
 DEVICE AND BINOCULAR OPTICAL)
 INSTRUMENT) December 2, 2003

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application:

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☒ No additional fee is required.

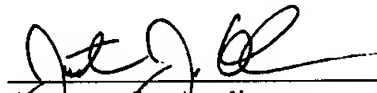
The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	MINUS	20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	4	MINUS	4	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145/\$290						—
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$___ is enclosed including the additional claims fee.
- ☐ Charge \$___ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 CFR 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for ___ month extension is enclosed.
- ☐ A check in the amount of \$___ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Justin J. Oliver
Registration No. 44,986

FITZPATRICK, CELLA, HARPER & SCINTO
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JJO/tmm

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